

# ISSUE FEE TRANSMITTAL

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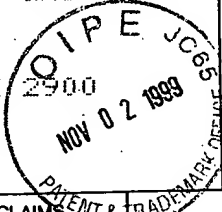
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JUDY KRUGER  
BRACEWELL & PATTERSON LLP  
711 LOUISIANA STREET SUITE 2900  
HOUSTON TX 77002

012/0830



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## Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for ~~first-class~~ **Express Mail** mail in an envelope addressed to the Box Issue Fee address above on the date indicated below. **Express Mail Label: EL2 80352 98945**

Judy Kruger (Depositor's name)  
Judy Kruger (Signature)  
Nov. 2, 1999 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/293,858	04/16/99	014	RICCI, J	3712 08/30/
First Named Applicant: TENTLER, 35 USC 154(b) term ext. = 0 Days.				

TITLE OF INVENTION: WRAP AROUND BOW STRING RELEASE STRAP

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3	084538.00700	124-035.200	A81 UTILITY	YES	\$605.00	11/30/

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Bracewell & Patterson  
2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Tru-Fire Corporation

(B) RESIDENCE (CITY & STATE OR COUNTRY)

N Fond du Lac, WI U.S.

Please check the appropriate assignee category indicated below (will not be printed on the patent)

- ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) \_\_\_\_\_ (Date) 11-2-99

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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11/04/1999 TTRANE 00000107 09293858 605.00 OF 01 FC-242